

<input checked="" type="checkbox"/>	Date of 1 st call
<input type="checkbox"/>	Left Message
<input type="checkbox"/>	No answer, callback
<input type="checkbox"/>	Date of 2 nd call

Application No. 09/742274
Attorney or Applicant Name: C. T. Graham
Telephone Number 304 765-5159

- *****
- ☐ Express Abandonment. Forward to 0220 immediately.
 - ☐ Retention. Forward to 0220 immediately.
 - ☐ Applicant does not have an attorney.
 - ☐ Applicant has an attorney.
 - ☐ If there is no attorney – Call Applicant.

 - ☐ Telephone service is disconnected. A new number was not available.
 - ☐ Telephone number has changed.
 - ☐ New telephone number is _____
 - ☐ Called the new telephone number.

 - ☐ Attorney no longer represents the applicant.
 - ☐ New Attorney has been assigned to this application.
 - ☐ Contacted New Attorney:
 - ☐ New Attorney: Name: _____
Telephone: _____

Abandon this Application (A copy of the RAM fee sheet must be enclosed)

- ☐ Sent for Abandonment _____
- ☐ Application should be abandoned as instructed by Attorney or Applicant
- ☐ _____
Name of person who requested PTO to abandon the application

Do Not Abandon this Application (A copy of the RAM fee sheet must be enclosed)

- ☐ Petition to revive. Forward to 0220 immediately.
- ☐ Attorney did not receive Missing Parts Notice. Attorney will fax copy of docketing information.
- ☐ Response received on _____ (See PTO mail stamp.) Response is in the application.
- ☐ Application is being forwarded to JCWS formalities review for processing.
- ☐ Check RAM. RAM inquiry indicates a response was received. Requested applicant/attorney to fax response to me. Response enclosed.
- ☐ **Awaiting call from Attorney**

☒ Review of this application was completed by [Signature]. Print your name